

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	6-14		04-24-01
<b>O.I.P.E. CLASSIFIER</b>		8	5-16-01
<b>FORMALITY REVIEW</b>	145	946	06/07/01
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1 ✓	
2 ✓	
3 0	
4 0	
5 0	
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7 0	
8 1	
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
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